

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS   | ID NO.     | DATE           |
|---------------------------|------------|------------|----------------|
| FEE DETERMINATION         |            |            |                |
| O.I.P.E. CLASSIFIER       | <i>TL</i>  |            | <i>2/4</i>     |
| FORMALITY REVIEW          | <i>67C</i> | <i>706</i> | <i>2-20-01</i> |
| RESPONSE FORMALITY REVIEW |            |            |                |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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H.S.  
2-21-01